Motion: The Legislation Committee recommends that the PTA Board adopt the following:

**Trauma Informed Care** Position Statement.

Rationale: Trauma is a widespread, harmful, and costly public health problem. It occurs as a result of violence, abuse, neglect, loss, disaster, war, and other emotionally harmful experiences. Trauma has no boundaries with regard to age, gender, socioeconomic status, race, ethnicity, geography, or sexual orientation. It is an almost universal experience of people receiving treatment for mental and substance use disorders. The need to address trauma is increasingly viewed as an important component of effective behavioral health service delivery.

A system of trauma informed care realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff and others involved with the system; responds by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively resist re-traumatization.

Research shows that the trauma informed approach is most compassionate, efficient and long-lasting, and is an approach appropriate for implementation in our schools and juvenile justice facilities. For these reasons, and those chronicled in the background information, the Legislation Committee seeks your support of this position statement.

Shannon Sevier
Signature of Committee Chair/Board Member
February 15, 2017

Date

The following information must be provided when submitting a proposed action item. The committee's staff liaison can assist with the necessary information below.

Budget Impact: N/A

Staff Impact: Provides guidance to staff when advocating on behalf of PTA

Impact to States: Provides national guidance to states as they advocate for laws and policies affecting opiate abuse and addiction.
Trauma-Informed Care

Since 1897, National PTA has played a critical role in crafting and advocating for federal, state and local policies that keep children healthy and create safe school environments. An estimated 46 million American children will be affected by violence, crime, abuse or psychological trauma in a given year—referred to as an adverse childhood experience (ACE). A groundbreaking Center of Disease and Prevention Centers (CDC) and Kaiser Permanente study in 1997 found that ACEs significantly harm a child’s brain development, and that they are the root cause of most chronic and mental illnesses and future violence in their adult years. To combat the negative effects of violence and trauma, National PTA advocates for providing significant resources and incentives to states and local jurisdictions to create connected communities, positive school climates and trauma-informed schools that keep students healthy and in school.

A positive school climate improves students’ ability to learn and grow. Children should come to school excited to learn in a safe and nurturing school environment, without the fear of bullying, hunger or violence. Our association believes that all schools must be trauma-informed or sensitive schools. Trauma-informed or sensitive schools provide resources and supports so that all adults within the school community can recognize and respond to those who have been impacted by traumatic stress, so that the school can provide evidence-based interventions and access to necessary services for students affected by ACEs.

National PTA supports continued efforts to research and promote evidence-based systemic prevention and intervention programs that enhance youth development, growth and safety. National PTA will continue to prioritize policies that protect youth and promote positive physical, mental and emotional well-being. Furthermore, our association will continue to call attention to the importance of family engagement in the development and implementation of school policies, positive school climate, family-focused inventions for youth involved in the juvenile justice system and mental health services and delivery to maintain a safe and healthy environment for all students.

A child’s exposure to ACEs and the resulting trauma significantly impacts their mental and physical health through adulthood, however research shows that the positive impact of mindful and healthy practices provides greater resiliency and improved outcomes. Additionally, early research highlights the promise for family and community-based interventions to reverse the negative impact of ACEs. Therefore, National PTA advocates for a comprehensive approach to addressing the needs of children exposed to violence and trauma, mitigating the negative impacts through access to health-related care, school and community-based resources and intervention, and improvements to the juvenile justice system.
National PTA recommends:

- States use the flexibility and available resources provided within the Every Student Succeeds Act (ESSA) to promote and support positive school climates.

- Federal, state and school district policies and practices support the creation and expansion of trauma-informed schools.

- School districts have the necessary resources to ensure schools have the necessary and qualified personnel to respond to the mental, physical, behavioral, developmental and academic needs of all students, but especially those affected by ACEs.

- School-based professionals—teachers, principals, counselors, nurses, psychologists, socials workers and paraprofessionals—are provided with professional development on the topic of resiliency in trauma-exposed children, thereby creating an education and support system that is trauma-informed at all levels.

- Replace exclusionary discipline whenever possible with evidence-based, multi-tiered behavioral frameworks, such as positive behavioral interventions and supports (PBIS) that improve school climate and safety.

- Continued federal support and expansion of the Maternal, Infant and Early Childhood Home Visiting program to increase access to evidence-based home visiting services that provide parents of infants and toddlers with knowledge, skills and resources related to child health and development.

- Increased access to violence prevention and mental health intervention and prevention programs for youth and their families affected by ACEs.

- States and local agencies make education and training programs available to families and caregivers about the warning signs that may mean a child needs further evaluation and/or intervention.

- State use of Center for Medicaid and CHIP Services (CMCS) resources to help meet the needs of children under Early and Periodic Screening, Diagnostic and Treatment (EPSDT), a component of Medicaid, with respect to trauma-informed services.

- Investment in and coordination of state and local mental health services, primary-care services and community programs to systemically address the needs of youth and families experiencing ACEs and exhibiting trauma symptoms.

- Strengthening professional training and licensing for related health personnel and practitioners to recognize and respond to youth at risk of, or affected by, ACEs.
• Training for law enforcement, juvenile and family court judges and youth judicial officers to recognize signs and symptoms of violence and the role that trauma plays in delinquency and the rehabilitation of youth.

• Federal and state policies support home or community-based care settings, instead of youth detention and incarceration, where appropriate.

• Provide incentives for states to prohibit the detention of children for status offenses and promote community, school and family-focused inventions for children who commit such offenses and are at high-risk of involvement in the juvenile justice system.

• State and local detention facilities are adequately staffed and funded to meet the trauma-related needs of detained and incarcerated youth, including appropriate, stable and safe placements that offer a continuum of care in parity with what the youth would receive if not detained or incarcerated.

• States should also promote trauma-informed continuum of care protocols within all agencies that provide care or support for homeless or foster youth.